PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

P3520

(Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			38		COIU	(COIdITITY 2)				OR I I		
EOD			U U		NII II 4	ED EVED 1		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			7 8 minus 20=		<u>* / 8</u>			X\$ 9=	162.00	OR	X\$18=	
INDEPENDENT CLAIMS			# minus 3 =		* 1			X42=	42.00	OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESÉNT		-			+140=		OR	+280=	i .
* If	the difference	in column 1 is	less than zero, enter "0"			column 2		TOTAL	579m	₽	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1)				(Column HIGHEST		(Column 3)	olumn 3) SMAI		ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM			+140=		OR	+280=	
		•					L	TOTAL		l	TOTAL	
		(Oaluma 4)		(0 -1	0\	(O - b 0)	/	ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1) - CLAIMS		(Colui		(Column 3)	Г		ADDI-			ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	CLAIM			+140=		OR	+280=	
		,					L	TOTAL ADDIT. FEE		OR .	TOTAL ADDIT. FEE	
		(Cołumn 1)		(Colui	mn 2)	(Column 3)	•	SDDII. FEE I		•	ADDII. FEEI	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Ī	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ŀ	X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		-	//15-		OR		· ·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					r fou	nd in the an	ronriate ho	r in col	umn 1	